## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09834312

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			22					RATE	FEE		RATE	F	EΕ
FOR			NUMBER FILED		NUMB	ER EXTRA	В	ASIC FEE	355.00	OR	BASIC FEE	710	0.00
TOTAL CHARGEABLE CLAIMS			2 2_minus 20=		• 2			X\$ 9=	j)	OR	X\$18=	3 €	5
INDEPENDENT CLAIMS			2 minus 3 =					X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						_	TOTAL		OR	, TOŢAL	7 <i>A</i>	6.	
CLAIMS AS AMENDED - PART II											OTHER		
(Column 1)			(Column 2)			(Column 3)		SMALL E		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL ZE
	Total	. (8	Minus	·· 0	2	=		X\$ 9=		OR	X\$18=	A	
	Independent	TATION OF MI	Minus	*** É	CLAIM	=		X40=		OR	X80=	./	
	FINOT PRESE	NIAHON OF MI	DETIFIE DEF	ENDEN	CLAIIVI			+135=		OR	+270=		
			. –				<b>L</b>	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colur	mn 2)	(Column 3)	AL	, DIT. 1 CC E			10011.1 221		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL
	Total	. 28	Minus	/	22	= 6		X\$ 9=		OR	X\$18=	108	00
	Independent	. 2	Minus	***	3	= /		X40=	• =	OR	X80=		
<u> </u>	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM		!   <u>                                  </u>	+135=		OR	+270=		
						6. 4		TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	108	·02
		(Column 1)		(Colur	nn 2)	(Column 3)	70	.011.1 CL =			ADDII. 1 EE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL EE
	Total	. 21	Minus	;	28	=		X\$ 9=		OR	X\$18=		
	Independent	. 3	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	JUIPLE DEI	'ENDEN	CLAIM		¹	+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									∩¤	TOTAL ADDIT. FEE			
		mber Previously P aber Previously Pa							ropriate box				